

ISSUE SLIP STAPLE AREA (for additional cross references)

JCS/705

| POSITION                  | INITIALS | ID NO.      | DATE               |
|---------------------------|----------|-------------|--------------------|
| FEE DETERMINATION         | BN       |             | 4-3-01             |
| O.I.P.E. CLASSIFIER       |          | 59          | 4301               |
| FORMALITY REVIEW          | KQ       | JCS/705     | 05/08/01           |
| RESPONSE FORMALITY REVIEW | RB<br>lt | 1049<br>907 | 08/05/01<br>9-2001 |

INDEX OF CLAIMS

- ✓ ..... Rejected                      N ..... Non-elected  
= ..... Allowed                      I ..... Interference  
- (Through numeral)... Canceled        A ..... Appeal  
+ ..... Restricted                    O ..... Objected

| Claim |          | Date |  |  |  |
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If more than 150 claims or 10 actions  
staple additional sheet here

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JCS-517  
9-2001-01